



**STATE OF NORTH CAROLINA
OFFICE OF STATE BUDGET AND MANAGEMENT**

BEVERLY EAVES PERDUE
GOVERNOR

ANDY WILLIS
STATE BUDGET DIRECTOR

September 16, 2011

MEMORANDUM

TO: Senator Phil Berger, President Pro-Tempore of the Senate
Representative Thom Tillis, Speaker of the House of Representatives

FROM: Andy Willis *AW*
State Budget Director

SUBJECT: Consultation on Expenditure of Grant Awards

Pursuant to Section 5.4 of Session Law 2010-31 (Senate Bill 897), the Office of State Budget and Management is to report to the Joint Legislative Commission on Governmental Operations prior to expending funds received from grant awards. Funding is anticipated to be received and expended for grants included in the attached Notifications of Application for Grant Funds/Awards.

If you have any questions or concerns, please contact me by telephone 919-807-4717 or email to andy.willis@osbm.nc.gov.

Thank you.

AWkl



Instructions at http://www.osbm.state.nc.us/files/grants_instr.pdf

1 Department	
2 Division (except in DHHS) DHHS only, choose division from drop down list.....	
3 Contact person (name)	
4 Phone number	
5 E-mail	
6 Funding Entity (grantor)	
7 CFDA number.....	
8 Grant title	
9 Grant application deadline (MM/DD/YY)	
10 Start date of grant (MM/DD/YY)	
11 End date of grant (MM/DD/YY)	
12 Application type	
13 Is this grant already in agency's continuation budget?	
14 Budget code the grant will be expended in (XXXX)	
15 Fund code (XXXX or NA)	
16 Is there a state matching requirement?	
17 If yes, what is the matching requirement?	
18 If yes, what is the source of state funds being used to match grant funds.	
19 Is there a maintenance of effort (MOE) requirement?	
20 If yes, what is the MOE?	
21 Is an additional General Fund appropriation required to meet the state match requirement?	
22 Will any of these funds be passed through to local govern- ments or non-state entities?	
23 If yes, identify affected entities by type	
24 Will additional state monies be required to continue the program if grant expires or is reduced?	
25 If yes, is this a requirement of the grant?	
26 Are new FTEs funded through the grant?	
27 If yes, give the number by type for each year.	
<i>Permanent</i>	
<i>Time-Limited</i>	
SFY 2010-11 Actual	<div style="text-align: center; margin-bottom: 5px;"> Complete either Authorized or Proposed ↓ ↑ </div> <div style="display: flex; justify-content: space-between;"> SFY 2011-12 Authorized SFY 2011-12 Proposed </div> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">For 2011-12</div> <div style="flex-grow: 1;"></div> </div> <div style="display: flex; justify-content: space-between;"> SFY 2012-13 Proposed SFY 2013-14 Proposed SFY 2014-15 Proposed </div>
\$11,000.00	
\$11,000.00	
Provide funds for Sheriff's Deputies' security services at the Safe Havens Supervised Visitation Center in Cumberland County	
new funding source, center 2099-2180	

Return completed form as email attachment and indicate in message that proper agency sign-offs have been obtained. Contact your OSBM budget analyst if you have questions.